



COMMA\HODMA\MANAGE\386053;1

CJZ/rac

April 2, 2003

DOCKET NO. 2866.1002-000 (UMMC98-13)

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Francis A. Ennis

Application No.: 09/159,172

Group: 1644

Filed: September 23, 1998

Examiner: Saunders, D.

Confirmation No.: 4830

For: PREDICTIVE ASSAY FOR IMMUNE RESPONSE

RECEIVED

APR 10 2003

TECH CENTER 1600/2900

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202

on

4/2/03

Date

Rachel Cohen

Signature

RACHEL COHEN

Typed or printed name of person signing certificate

Box NON-FEE AMENDMENT

Assistant Commissioner for Patents

P.O. Box 2327

Arlington, VA 22202

Sir:

Transmitted herewith is a Substitute Amendment for filing in the above-identified application.

[] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	12	MINUS	* 20	0
INDEP	3	MINUS	** 4	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

* not fewer than 20

** not fewer than 3

SMALL ENTITY

RATE		ADDIT. FEE
X	\$ 9	\$
X	\$42	\$
+	\$140	\$

TOTAL = \$ 0

OTHER THAN
SMALL ENTITY

RATE		ADDIT. FEE
X	\$18	\$
X	\$84	\$
+	\$280	\$

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

[X] A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By


Carolyn S. Elmore Esq.

Registration No.: 37,567

Telephone (978) 341-0036

Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: 4/2/03